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ABSTRACT

In a relatively brief period of time, many clinicians and agencies have sought to use the World Wide Web as a means to access clients, impart information, advertise, or educate. Increasingly, counselors and other mental health professionals are seeking to provide or to supplement client services over the Internet. Unfortunately, amidst all the hype and publicity, the reality of counseling services that are currently provided over the Internet may be misunderstood. This article helps to clarify the realities and dispel some myths surrounding online counseling services. First, definitions of counseling will be considered to help the reader determine if online services are counseling, or if they may be better termed as educational, consultative, or supportive services. Second, research addressing elements necessary for effective counseling will be reviewed to help the reader consider the potential effectiveness of services and where additional improvements may be of help. Third, the article reviews the range of services that are readily available on the Internet. Finally, attempts are made to consolidate this information in preparation for additional information that focuses on specific online counseling activities. (Contains 37 references.) (Author)

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Chapter Seven

Understanding Online Counseling Services Through a Review of Definitions and Elements Necessary for Change

J. Michael Tyler and Lorraine J. Guth

It is easy, sitting comfortably ensconced in the early stage of the 21st century, to look at the technology that surrounds our lives and forget how recent the introduction of many of these advances has been. The Internet, one of the more pervasive technological advances, has moved from a curiosity used by academics and the military to a worldwide phenomenon used by children for communication, adults for information, and uncounted millions for entertainment. Every aspect of American life seems to have been reworked to accommodate this new medium, and new technologies spring up regularly allowing us easier access, quicker data transfer, and more useful adaptations.

In this environment, it seems almost incomprehensible to recall that the World Wide Web (WWW), that aspect of the Internet which has fueled its commercial popularity, was started in 1991 by the CERN Research Center. The first web page posted in the United States went online December 10 of that same year (Festa, 2002). In slightly more than 10 years we have gone from the first web site to billions of individual pages. While an exact count of web pages is impossible, on June 14, 2002, Google, a popular search engine, claimed to have over 2 billion pages indexed (Google, 2002). Over 30 million separate domains have been registered (Domain Stats, 2002). A search for the term "counseling online" using Google resulted in 814,000 sites identified. These enormous numbers suggest the importance of the Internet, the availability of massive amounts of information, and the scope of potential impact this medium represents.

Like the World Wide Web itself, the connection between counseling and the Internet is not very old. A search of PsychINFO on the terms "counseling Internet" resulted in only 88 citations dating back to 1995. A similar search on the terms "therapy Internet" resulted in citations dating

back only to 1996. It is also known that early adopters of technology were presenting papers at conferences during this same time period (Tyler & Bannan, 1995; Bryant, 1995). Thus, it appears that widespread discussions of the connection between the Internet and counseling services is probably not much more than eight years old.

In this relatively brief span of time, many clinicians and agencies have sought to use the World Wide Web as a means to access clients, impart information, advertise, or educate. Increasingly, counselors and other mental health professionals are seeking to provide or to supplement client services over the Internet. The promise that this medium offers is great; access to greater numbers of clients, removal of barriers to access for clients, more flexibility in scheduling, decreased costs, and more choice for clients are a few of the strengths that proponents identify. If these characteristics are shown to be true, then the medium does appear to hold promise for mental health professionals. However, others argue that too little is known about the medium to be offering widespread services, that effective counseling cannot be offered in a text-based environment, and that counseling services may suffer from a rush to move into this new frontier.

Unfortunately, amidst all the hype and publicity, the reality of counseling services that are currently provided over the Internet may be misunderstood. Websites may make claims that are broader than the services they actually deliver, and the services delivered may actually be less extensive than many professionals believe. Among consumers, the misinformation may be even greater. What consumers refer to as "online counseling" may be better described as education services, and what professionals may refer to as "online services" may actually be heavily supplemented with phone contact or even personal meetings.

This chapter will help to clarify the realities and dispel some myths surrounding online counseling services. First, definitions of counseling will be considered to help the reader determine if online services are counseling, or if they may be better termed as educational, consultative, or supportive services. Second, research addressing elements necessary for effective counseling will be reviewed to help the reader consider the potential effectiveness of services and where additional improvements may be of help. Third, the chapter will review the range of services that are readily available on the Internet. Finally, attempts will be made to consolidate this information in preparation for chapters that follow in this text, which focus on specific online counseling activities.

Defining Counseling

In surveying the literature regarding the definition of counseling, it is apparent that there is not one single universal definition of the term. The following examples show how the term is conceptualized:

The American Counseling Association (2002) stated:

> Professional counseling is the application of mental health, psychological or human development principles, through cognitive, affective, behavioral or systemic interventions, strategies that address wellness, personal growth, or career development,as well as pathology (http:www.counseling.org/consumers_media/servingallpeople.htm).

Nugent (2000) wrote:

> Professional counseling is a process during which counselor and client develop an effective relationship, one that enables the client to work through difficulties. (p. 2)

Nystul (1999) stated:

> Counseling is an attempt to balance the subjective and objective dimensions of the counseling process. The counselor, like an artist, can sensitively reach into the world of the client, yet on some level maintain a sense of professional and scientific objectivity. (p.2)

Hershenson, Power & Waldo (1996) wrote:

> Counseling is a proactive, holistically oriented process for helping persons learn to cope with problems of living or for promoting healthy development. It is an interpersonal process involving a professional with the requisite graduate education and experience in counseling (the counselor), using scientifically valid methods, working with an individual, family, group, organization, or segment of a community that is seeking assistance (the client). This process involves empowering the client to decide on feasible goals and to identify, develop, and use personal and environmental resources to attain these goals. The process may be facilitative..., preventative..., remedial..., rehabilitative..., or enhancing... (p. 6)

Vacc & Loesch (2000) & Gladding (2000) point out that there appears to be a high level of agreement about certain common aspects of the

counseling process. These commonalities among the various definitions are synthesized below:

1. Counseling is a process.
2. The core of the counseling process is the relationship between the counselor (person providing assistance) and client (person receiving assistance).
3. The counselor is appropriately trained, ethical, and professional.
4. Counseling deals with wellness, personal growth, career, and pathological concerns.
5. Counseling moves through orderly, evolving, identifiable stages.
6. Counseling can be provided via a variety of modalities, theories, and specialties.
7. Counseling can be provided within developmental, preventative, and/or remedial, perspectives.
8. Counseling is based on an identifiable knowledge base, is practiced in a manner in which the relationship between the knowledge base and counseling behaviors can be identified, and is amenable to evaluation through application of professionally accepted methodologies.

These shared components of counseling provide a framework from which the concept of cybercounseling can be examined and discussed.

It is important to recognize and acknowledge the distinction made in the literature between counseling and psychotherapy. Peterson & Nisenholz (1999) contend that the one main difference between these terms is that counseling deals more with developmental issues whereas psychotherapy deals with more serious psychopathology. However, more recently it has been recognized that counselors do deal with pathology as noted in the American Counseling Association definition of counseling. Because these terms are at times used interchangeably by others, and because it is difficult to determine the distinction that professionals offering online services may make, in this chapter the authors will use these terms interchangeably.

Four Common Elements of Counseling and Psychotherapy

When thinking about the counseling process it is important to consider what factors promote growth and change in clients. In a review of the literature, Walborn (1996) found that numerous theorists have identified therapeutic factors that are common to all theories/modes of counseling

and psychotherapy. Walborn concludes that "four process variables are necessary for change: (a) a therapeutic relationship; (b) cognitive insight; (c) affective experience; and (d) appropriate client expectations" (p. 116). A thorough review of the literature regarding these process variables is beyond the scope of this chapter. However, a brief overview of each process variable along with some relevant research will be offered.

The Therapeutic Relationship

When discussing the counseling process Yalom (1980) emphasized, "it is the relationship that heals" (p. 401). Stiles, Shapiro & Elliot (1986) defined the therapeutic relationship as "a positive emotional bond and sense of mutual collaboration" between a counselor and a client (p. 173). When discussing the key factors that contribute to effective counseling relationships, Rogers (1957) emphasized the importance of genuineness, empathy, and unconditional positive regard. Genuineness refers to the counselor being real or authentic. Empathy is when a counselor understands the client from his/her frame of reference and communicates this understanding. Unconditional positive regard involves the counselor having a respectful, accepting, and prizing attitude toward the client. As these core conditions are present in a counseling relationship, a climate of safety and trust is promoted where a collaborative counseling relationship develops (Walborn, 1996). Numerous researchers have documented the importance of a good therapeutic relationship in achieving positive counseling outcomes (Garfield, 1994; Goldfried, Greenberg & Marmar, 1990; Luborsky, Barber & Crits-Christoph, 1990; Orlinsky, Grawe & Parks, 1994; Sexton & Whiston, 1994).

Cognitive Insight

Walborn (1996) contends that some form of client cognitive insight is necessary for change. Gelso, Kivlighan, Wine, Jones & Friedman (1997) define insight as the "extent to which the client displays accurate understanding of the material being explored. Understanding may be of the relationship, client's functioning outside of counseling, or aspects of the client's dynamics and behavior" (p. 212). Thus, this variable relates to the client's belief that the new insights can help to resolve his or her issues.

When reviewing the literature related to this process variable, Claiborn (1982) & Walborn (1996) concluded that numerous empirical studies indicate that cognitive insight is an important process variable. For example, O'Conner, Edelstein, Berry & Weiss (1994) found that the higher the level of client insight across counseling, the better the outcome. Additionally, Kivlighan, Multon & Patton (2000) found that when there was an increase in insight during the course of counseling, there was a reduction in

symptomology and client complaints. However, other studies do not support this conclusion (Gelso, Kivlighan, Wine, Jones & Friedman, 1997).

Affective Experience

"By providing a secure and safe environment in which feelings may be expressed, therapists supply the much-needed motivation for change" (Walborn, 1996, p.121). Greenberg & Safran (1987) believe the experiencing of emotions in counseling involves the following six processes: acknowledgement of feelings, creation of meaning, arousal, taking of responsibility, modification of dysfunctional affective responses, and expression of feelings in the therapeutic relationship. Therapeutic change can occur when the counselor provides a holding environment where clients can be with the feelings that have been too painful to integrate or come to terms with (Teyber, 2000).

Appropriate Client Expectations

Regardless of the type of counseling utilized, client expectations about the process may impact treatment. If client expectations are not met, they may refuse to cooperate or prematurely terminate (Barich, 2002). Clients are more likely to remain in counseling if they are motivated and have realistic expectations of what to expect in counseling and would thus be more likely to change (Strupp & Binder, 1984; Walborn, 1996). This more positive outcome may be facilitated if the counselor guides the client in an exploration of motivation, expectations regarding the helpfulness of counseling, and an understanding of the process (i.e. roles, responsibilities, length of treatment). In fact, Tokar, Hardin, Adams & Brandel (1996) found that those clients who expect to assume personal responsibility during their work in the counseling process are more likely to have a collaborative and productive counseling experience. Research has also shown that when clients' expectations are matched by the counselor, they have greater satisfaction with the service provided and are impacted more by counselors' interventions (Harrington, 1993). Additionally, Garfield (1994) cited a number of research endeavors that have found a correlation between the expectations of the client and the outcome of the counseling experience. These findings support the notion that productive counseling can occur if counselors adjust to the expectations of the client and help them to modify expectations that may be unrealistic (Barich, 2002).

This understanding of counseling and the counseling process indicates that effective counseling requires the inclusion of certain elements. By focusing on these key elements, it is possible to review counseling programs, counseling theories, and specific counseling services to determine the

likelihood that essential characteristics exist suggesting the likelihood of positive outcomes. Of course, to definitively determine outcomes, evaluation studies must be conducted. But in the rapidly changing world of the Internet, the provision of services seems to be outpacing the ability of the profession to conduct outcome research. As a step toward understanding online counseling services without the benefit of significant research, the following section will review services that are currently being offered from the framework established in the first portion of this chapter.

Online Counseling Services

As noted earlier, a web search for "online counseling" returns a tremendous number of potential sites to review. However, the truth is that a relatively small number of those sites returned are actually sites that provide online counseling services. Using more advanced search techniques, a more realistic compilation of 121 sites were identified. Reviewing these sites, over 50% were directories that contained lists of online counseling sites and the lists were quite repetitive. Other sites that were identified in this search included debt counseling, sites no longer active, and duplicate sites. This Google (google.com) search resulted in 20 sites that actually were available counseling sites. A review of the directories found in the Google search increased the overall number to 92 sites that a client might easily find if they were searching for online counseling services.

In this process, one of the more interesting findings was that many sites that have been catalogued are no longer in service. On one directory listing (Woman 2 Woman, 2002) 65% of the sites listed were no longer active. This may indicate that a large number of individuals and organizations have attempted to create and maintain web sites, only to abandon the project for unknown reasons.

The list of 92 sites was carefully reviewed to determine what services were offered. After reviewing each web site individually, five more sites were removed because they offered only telephone and traditional office-based services, and four were removed because they offered only office-based services. This resulted in a final list of 83 sites available in the summer of 2002 that offered some online services (note that this list is not intended to be exhaustive, but representative). Figure 1 offers a breakdown of the types of services that these sites advertise.

E-mail based services were the most widely employed method of providing online services. Typically, sites offering e-mail counseling charge by the e-mail, or by the time required to craft a response to the client's e-mail. In some cases, client's can purchase a predetermined number of e-

mail responses at a reduced rate, or unlimited e-mails for a specific period of time.

Table 1. Types of Service Offered by 83 Online Counseling Sites

Service Modality	Number*	Percent
E-mail based	65	78
Text-Chat	47	57
Telephone	39	47
Video-Conferencing	10	12
Group Text-Chat	7	8
Online Assessment Materials	7	8
Snail Mail Services	5	6
Bulletin Boards	4	5
Online Audio-Conferencing	2	2
Online Journaling	1	1

*Number of sites in table does not equal number of sites reviewed because most sites offered more than 1 type of service.

Text-based chat services were the second most common service approach. Typically, these sessions require a pre-determined appointment time and clients are charged by the half-hour or hour, although some sites charge by the minute. A few sites did advertise that they had counselors standing by and available for immediate chat sessions using Mirabilis ICQ or some other instant messaging program. Another very common approach was to provide counseling via the telephone. Telephone services are generally billed in a manner similar to traditional face-to-face services. The high percentage of sites offering telephone services indicates that many counselors are looking for ways to maintain relationships that are as close as possible to more traditional face-to-face counseling. Of those services offering e-mail counseling, 38% also offered telephone-based services. Of those offering counseling via chat programs, 57% also offered telephone-based services.

A relatively small group of sites (12%) was attempting to provide services using video-conferencing technology. Such video-based services may offer the best opportunity to create a counseling interaction analogous to traditional face-to-face counseling. The quality of these services is highly dependent on the manner in which the practitioner and client access the Internet as well as the software and hardware used. When both parties

have available quality equipment and high-speed access, a reasonable video stream can be established that will allow the counselor to view most large motor movements (hand gestures, yawns, etc), although some small movements (clenched fists, stiffening of upper torso muscles) will still be difficult to detect. Common dial-up connections will provide low quality video streams that will be seen as a series of low resolution still images rather than streaming video. In this case, large amounts of information will be lost. In addition, to accommodate the bandwidth demands of the video stream, the audio quality is often reduced, creating difficulty in understanding voice tone, pacing, and inflection.

The first section of this chapter reviewed literature on what constitutes counseling and what makes counseling effective. The second section identified what online services are readily available. It is now possible to consider if the currently available online services possess the elements required to be considered counseling and the extent to which they possess the elements necessary for effective counseling.

Earlier, eight elements were identified as common components of the counseling process. The first two of these components are readily identifiable in online services. Online services clearly represent a process of exchange and seek to build a relationship between the individuals involved.

The third component - the counselor is appropriately trained, ethical and professional - may raise a concern. In some cases, services provided online are not provided by professionally trained individuals. This is apparent at New Hope Online (2002), an organization offering Christian counseling services, that is largely staffed by volunteers without formal training. While this information is readily available, its meaning to a client may not be fully understood, particularly while trying to move through a crisis. Additionally, many sites reviewed are staffed by individuals who do not provide full disclosure of their professional training. Thus, while it may be apparent that someone has a graduate degree, the exact nature of the degree is not always clear and many sites fail to indicate that all counselors are appropriately licensed. Finally, it is questionable if any counselors are trained to offer services via e-mail or online chat sessions. Because these modalities are new to our profession few graduate training programs teach how best to provide such services and few provide supervised experiences working with cyber clients. Only a handful of sites ensure that their counselors have extensive consultation, supervision, and ongoing training.

Further considering common elements, online services reviewed clearly address a broad range of concerns appropriate for counseling services (element 4), a variety of modalities and approaches (element 6), and developmental, remedial, or preventative services (element 7). Element 5

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states that counseling progresses through orderly, identifiable stages. The extent to which online services meet this criteria is currently unknown. Many such services are designed to be extremely short-term, often a single session. This is no different than the large number of clients who seek services and maintain only a single appointment. At times these services may be classified as consultation, education, or advice rather than counseling. In any event, the online service is likely not significantly different than many face-to-face single sessions.

The final common element specifies that counseling is tied to an identifiable knowledge base. Clearly, the knowledge base specific to online services is immature and growing. However, it appears that most of the online services being provided are tied to the broader domain of counseling literature. The developing base specific to online services is no different than the developing base of literature related to any new treatment modality. To the extent that these new procedures are developed as an extension of current practice and knowledge of the profession and are evaluated through accepted methodology, then the services meet the criteria established. This review suggests that online services can contain the elements necessary to be considered counseling.

If developing services provided online can be appropriately conceptualized as counseling, the next step is to determine if they display qualities necessary to be considered potentially efficacious. Previously, four process variables were identified. The extent to which these exist in the services that are offered online will provide some understanding about the potential these services offer.

The first critical counseling process variable is the therapeutic relationship. Such a relationship is built around safety and trust. Trust develops across time as two or more individuals share important information and have the experience of personal information being received and handled in a respectful manner. The relationship is put through a series of tests across time as the counselor demonstrates his/her worthiness and the client learns to be increasingly trusting.

Certainly sensitive information can be exchanged in an electronic format as readily as it can be in a face-to-face meeting. In fact, some authors have argued that it is easier to exchange information electronically because of the increased anonymity. The client does not have to face another person directly, thus reducing the potential risk of disclosure and giving the client an opportunity to edit thoughts prior to sending them to the counselor (Child Psychotherapist.Com, 2002). Others have noted that online counseling is appropriate for clients who are uncomfortable around people (Zelvin, 2002).

These very arguments, offered as benefits, may also remove online work from the realm of effective counseling described earlier. The ability to edit thoughts at great length gives the client the ability to carefully construct the relationship he or she wishes to have with a counselor, reducing the authenticity and genuineness of the input. Of course, clients in all counseling relationships may edit themselves and their disclosures, but in a therapeutic relationship there is an expectation that the client will increasingly live in the moment, experience the relationship as it exists, and respond honestly to the thoughts and emotions of the instant. In traditional service formats the counselor has the client's words as well as other verbal and nonverbal information to help understand the entirety of the client's communication. This information is integrated and interpreted, and when necessary, the counselor can confront the client about discrepancies. This process helps the client remain genuine and in the here and now and helps foster the relationship by experiencing the counselor as caring, respectful, and honest. Therefore, while a therapeutic cyber relationship has the potential to develop, it is clear that it will differ from the traditional relationship upon which current counseling theory and practice is built. How this will impact counseling outcomes remains to be seen.

The second important process variable is cognitive insight which is achieved as the client considers experiences in the counseling process as well as information provided by the counselor. E-mail, streaming video, and chat programs can all be used by a clinician to provide clients with feedback in an attempt to raise awareness. By providing an archive of all communication between the counselor and client, online services may have the added advantage of offering clients the ability to review exchanges, thereby decreasing the potential for misunderstanding and distorted recall. This aspect of the counseling relationship may actually enhance some exchanges and provide new opportunities for client growth.

While some benefit may be achieved, potential problems remain. One aspect of cognitive insight relates to clients ability to gain new insight into their impact on others and understand how others perceive them. By developing a relationship entirely mediated by computer-based text exchange, counselors do not have the ability to experience the client as others in the client's world do. Similarly, the client does not have the opportunity to experience the warmth and healing presence of the counselor. A smile, a nod, a light touch are all components of human exchange that cannot be experienced via text. This missing component may decrease the range of cognitive insight that clients are able to gain during online counseling. For those clients who focus on problems that can be represented

entirely as cognitive distortions and are amenable to education and practice, this may not be a noticeable deficit. However, to other clients whose problems are more relational, or to counselors who operate with a greater focus on interpersonal exchange, this deficit may prove quite severe.

The third process variable identified is affective experience. The client must have the opportunity to not only appropriately acknowledge emotion, but also to experience emotion, create meaning, and express emotion in the context of a healthy therapeutic relationship. Tyler and Guth (1999) have argued that the experience of emotion is connected to operations in the preconscious experiential system as proposed by Epstein's Cognitive-experiential Self-theory (1994). The act of using a computer, of composing and typing text, is a rational process that is moderated by the conscious rational system. This dual processing theory suggests that clients cannot obtain the same level of affective experience or awareness when engaged in the rational act of operating a computer that is achieved when having the experience of creating a relational exchange directly with another human.

This proposed inability to achieve the same level of affective experience may be the single greatest deficit of counseling services that are mediated by computer. Counseling services that are premised on interactions that are highly educational, directive, and rational may be less impacted than services that are geared toward emotionally charged experience and exchange. While it is possible to imagine a cognitive-oriented counselor working with a client to learn thought stopping techniques online, it is harder to imagine a gestalt counselor working with a stuck client by focusing on experienced muscle tension and giving voice to the tension. Similarly, it is easier to imagine a client focusing on identifying appropriate career goals than on addressing overwhelming grief related to a significant loss.

The fourth and final process variable is related to client expectations. No studies have been reported in the literature to date that clarify client expectations for online services. Clients with previous counseling experience may expect to develop a relationship and exchange very similar to that which they have had in the past in traditional counseling settings. Other clients, without a previous history of counseling, may expect online services to imitate exchanges they have had in chat rooms or with e-mail contacts. As noted, the congruence of client expectations and client experience is very important to satisfaction and outcome. Because client expectations can vary considerably, building services based upon expectations is difficult. Further, since clients do not have expertise in what processes make counseling effective, relying solely on their expectations to create services is not likely to lead to the best possible service offerings. By helping to educate clients, counselors that provide online

services can help to create appropriate expectations that can be met, and will thus improve potential outcomes.

Many sites reviewed strive to provide information for clients that will aid in the development of appropriate expectations. Most sites clearly define the manner in which communication is conducted and carefully describe the costs. A number of sites also offer cautionary statements describing limitations on services. These statements generally indicate that online services are not appropriate for individuals who are homicidal, suicidal, not in touch with reality, or dealing with issues of paranoia (see Brief On Line Therapy at http://www.briefonlinetherapy.com/cautions-pros-cons.html#limitations as an example). However, not all sites offer such cautionary statements and the range of concerns which online counselors state they can address is quite varied and includes many difficult concerns such as eating disorders, addictions, and impaired professionals.

Summary

Counseling, by its nature, encompasses a wide range of activities, is designed to meet a wide range of needs, and can take many forms depending on the clinician and needs of the client. In spite of this great diversity, a number of common elements have been found to exist not only in definitions of counseling, but also in aspects of the process itself which predict desirable outcomes.

Based on the definitions explored and the process variables advanced as necessary elements for effective services, it is reasonable to conclude that counseling can and is being provided over the Internet. Further, it appears that it is possible to provide services that are likely to have productive outcomes for at least some groups of clientele. For clients with certain concerns, particularly those that have limited access to services because of geographic constraints or other significant barriers, these online services offer a viable alternative.

The news, however, is not all positive. There remain a number of important issues that need to be addressed. These include appropriate training and legal oversight by the profession. Counselors with an interest in these services and educators who train them must immediately invest in expanding the knowledge base and creating opportunity to raise awareness and skills to the highest level possible. Where research provides evidence of appropriate technique, clinicians need to be aware and have the opportunity to be supervised in implementation. Where research is lacking, knowledgeable leaders must coordinate efforts locally and nationally to develop study teams and supervision groups to provide adequate oversight

while others work to develop the research necessary to identify and then fill in gaps in our knowledge.

In addition, professional organizations must take a strong leadership role in educating counselors as well as consumers about this new array of services. Having developed guidelines for online counseling services (American Counseling Association, 1999), the American Counseling Association needs to continue efforts to disseminate these guidelines and proactively work with online service providers to ensure that they meet these minimum standards. Helping clients to have access to and understand these guidelines will assist clients in finding appropriate and ethical service providers.

Finally, everyone interested in mental health services, including professional organizations, non-profit agencies and foundations, government agencies, and the medical establishment, must work to create and fund a research agenda to facilitate this rapid growth in the application of technology to mental health needs. Currently driven by market forces, services are developing with a focus on revenue rather than client need. In the 1980's, for-profit acute care psychiatric facilities burgeoned into a multibillion-dollar industry only to collapse by the mid 1990's as reforms swept through the insurance industry, and these facilities were largely unable to justify their existence. Money spent now to understand the role of online services and promote clinician and consumer awareness will help to ensure that a viable, responsive, and effective professional industry develops.

In the following chapters, several online service providers will detail their services. These chapters will provide a more in-depth look at specific services resulting in a much richer detailing of services than the current chapter was able to provide. In so doing, the providers will be able to highlight the strengths of their services, as well as detail steps taken to address specific problems that were anticipated or encountered. As case studies, they provide rich data about the potential for online services. As you review these chapters, consider the issues raised in the current chapter. Do the services described contain the elements necessary to be considered counseling, or are they more limited in scope, perhaps better characterized as educational or consultative services? What steps have these providers taken to protect clients as well as clinicians? Most importantly, do these providers offer services consistent with their claims and responsibilities? Counseling services are indeed changing and the following chapters represent one look at the future.

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